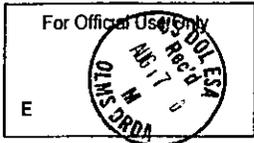


FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P L 86-257, as amended Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U S C 439 or 440



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

| | |
|--|---|
| 1 File Number U - <u>8994</u> | 2 Fiscal Year Covered From <u>1</u> / <u>1</u> / <u>2004</u> Through <u>12</u> / <u>31</u> / <u>2004</u> |
| 3 Name and address of person filing Name <u>Mark</u> <u>K</u> <u>Seasholtz</u> P O Box, Bldg, Room No, if any <u>Po Box 2097</u> Street _____ City <u>Newburgh NY</u> State <u>NY</u> ZIP Code + 4 <u>12550</u> | 4 Name, file number, and address of labor organization Name <u>Teamsters Local 445</u> Labor Organization File Number <u>027-514</u> P O Box, Building and Room Number, if any <u>Po Box 2097</u> Street _____ City <u>Newburgh</u> State <u>New York</u> ZIP Code + 4 <u>12550</u> |
| 5 Position in labor organization <u>Business Agent</u> | |

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)

| | |
|---|---|
| A Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent. | |
| 6 Name and address of Employer (including trade name, if any) Name _____ Trade Name, if any _____ P O Box, Bldg, Room No, if any <u>N/A</u> Street _____ City _____ State _____ ZIP Code + 4 _____ | 7 a Nature of Interest, Transaction, or income _____ 7 b Amount <u>0</u> |

Signature

15 Signature and verification The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is to the best of the undersigned's knowledge and belief, true, correct, and complete (See the section on penalties in the instructions)

Signed Mark Seasholtz On 8/19/05 _____
Date Telephone Number

B Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name, if any)

Name Teamsters Local 445

Trade Name, if any

P O Box Bldg Room No , if any PO Box 2097

Street

City Newburgh

State New York ZIP Code + 4 12550

9 Business deals with

a Labor Organization

b Trust

c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name Local 445 - Welfare Fund

Trade Name, if any

P O Box, Bldg , Room No if any PO box 2572

Street

City Newburgh

State New York ZIP Code + 4 12550

11 a Nature of such dealing

Union Trustee

11 b Approximate dollar value of such dealing 0

12 a Nature of interest held or income received

Reimbursement For Educational Conference:
Segal Advisors- 4/24/04-4/30/04 - \$2,366.40

12 b Amount \$ 2,366.40

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name, if any)

Name Joseph Corcoran

Trade Name if any Moore Stephens, PC

P O Box, Bldg Room No , if any

Street 340 North Ave

City Cranford

State New Jersey ZIP Code + 4 07016

14 a Nature of payment

Golf + Dinner Outing
6/18/04

13 b Is the Business an Employer or Consultant ?

14 b Amount of payment \$ 135.00